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FOURTEENTH ANNUAL REPORT

OF THE
MEDICAL OFFICER OF HEALTH
FOR THE YEAR 1912.



GUERNSEY :
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REPORT
OF THE
MEDICAL OFFICER OF HEALTH
FOR THE YEAR 1912.

RAPPORT DE L'OFFICIER DE LA SANTÉ PUBLIQUE.

Letter from the President of the Board.

States Office, Guernsey, April 29th, 1913.

SIR,

I have the honour to present the Fourteenth Annual Report of the Medical Officer of Health for the year 1912, and to request that it may be printed as an Appendix to the "Billet d'État," and that a certain number of copies (say 100) be struck off for distribution in the usual way.

I have, &c., &c.,

JOHN N. BROUARD,

President, Board of Health.

William Carey, Esq., Bailiff,

and President of the States of Guernsey.



GUERNSEY.

Area in statute acres—15,723.

Area in square miles—24·5.

POPULATION.—Males —20,395.

Females—21,459—41,854.

HOUSES.—Inhabited—9,710.

Unhabited —427.

Constructing—27.

Density of population per acre—2·6.

„ „ per square mile—1,664.

Average number of inhabitants per house—4·3.

Death rate per 1,000 = 13·1.

Average previous 10 years—14·9.

Birth rate per 1,000 = 23·5.

Average previous 10 years—25·8.

Rainfall, 1912—43·07 inches.

North end of island, Fort Doyle—36·75 inches.

Platte Fougère Lighthouse—17·76 inches.

Average rainfall—36·62 inches.

*Sunshine—1,704 hours (the least sunny year on record).

Sunshine average—1,905 hours.

* The record for the British Isles for the year 1912.

REPORT FOR 1912.

The natural increase of births over deaths for the year was 431, but as emigration has been active I have thought it best to estimate the population at the middle of the year as if it had remained stationary for the twelve months. I regret that I am unable to obtain figures as to the numbers of persons who have lately emigrated, but can understand from the reasons given me by the agents of the various shipping companies why they do not feel at liberty to give me this information.

I gather however that popular opinion over-estimates the number of emigrants leaving here; but one thing is certain and this is, that they are of a desirable class, and it is a matter for regret that the prospects of life in newer countries should cause them to leave Guernsey.

As there is but little unemployment here, it is a fair inference that their places are filled almost entirely by an influx of aliens.

This is a very important matter for our community, and in connection with it I will quote extracts from my former reports.

1905.—“That the cultured and wealthy foreigners are increasing in numbers and landed property is self evident, and special laws have been framed to deal with them. Unfortunately with the exception of deportation, there is no check against the immigration of undesirable aliens.

Large numbers of them are with us and they are answerable for an altogether undue amount of crime and drunkenness; as a class they live in such conditions of overcrowding and insanitation that they constitute a source of great danger to both the bodily health and the morals of the community in general.

It must also be remembered that in times of continental disturbance their numbers would quickly increase.

If Great Britain, where the total alien population is insignificant compared with ours, has framed special laws to lessen this alien influx, surely Guernsey, where the need is so much greater, should take some steps to cope with this evil and prevent such persons from landing here.”

IX.—1913.

1907.—“It is evident that a large percentage of the French population are law-abiding and of a desirable class, but unfortunately the remainder are the very opposite.

The Police Court has to deal not only with the resident population, but with the floating population of two ports, and although no statistics of convictions are obtainable from the Greffe Office, anyone reading the newspapers cannot fail to notice how large is the proportion of French people convicted compared with the number resident in Guernsey.

The criminal and the diseased can land here freely and without hindrance, and although for a period of twelve months they can be repatriated at the expense of the vessel which brought them, but only if they are unable to maintain themselves, after which time they must be sent back at the public expense.

Whilst here they can compete in the labour market without the liability to Militia Service which attaches to the native of the soil, who is thus unfairly handicapped in his efforts to earn his living.

For serious crimes imprisonment might well be followed by banishment from the island for life, photography and the finger print system being used for purposes of future identification.”

1908 and 1909.—“It is not generally known that the Aliens Act in England also applies to aliens coming from the Channel Islands, probably on account of the ease with which aliens are allowed to land there.

Under the Aliens Act an immigrant is considered undesirable :

- (a) If he cannot show that he has in his possession or is in a position to obtain the means of decently supporting himself and his dependants, if any. (This is held to mean a sum of £5 for himself and £2 for each dependant.)
- (b) If he is a lunatic or idiot, or owing to any disease or infirmity appears likely to become a charge upon the rates or otherwise a detriment to the public.
- (c) If he has been sentenced in a foreign country with which there is an extradition treaty for a crime, not being an offence of a political character, an extradition crime within the meaning of the Extradition Act 1870.
- (d) If an expulsion order under this Act has previously been made in his case.

In December, 1908, the Board of Health, after careful consideration of the Alien question, has decided unanimously to approach the Royal Court with a view to obtain medical inspection of foreign immigrants, and also to have the further powers of the English Aliens Act enforced here by law."

There were, I believe, certain difficulties which prevented this sound advice being carried out, but surely another attempt should be made to see if these difficulties cannot now be overcome and this desirable object achieved.

Although the results of the Census of 1911 for England and Wales have been published for some considerable time, those for the "Islands of the British Seas" are not yet available. They will be of much interest and importance to us, but a consideration of them must of necessity be deferred for another year.

Table I. (INCORP. SOC. OF M. O. H., 1900 (FOR WHOLE DISTRICT).

YEAR.	Population estimated to middle of each year.	BIRTHS.		DEATHS UNDER ONE YEAR OF AGE.		DEATHS AT ALL AGES.	
		Number.	Rate per 1,000.	Number.	Rate per 1,000 registered.	Number.	Rate per 1,000.
Column ...	1	2	3	4	5	6	7
1902.....	40,475	1,128	27·0	161	142·7	657	16·2
1903	40,650	1,120	27·5	112	100·0	597	14·6
1904.....	40,795	1,144	28·0	181	158·2	690	16·9
1905.....	40,884	1,129	27·6	155	135·0	644	15·7
1906.....	40,990	1,112	27·1	154	138·4	588	14·3
1907.....	41,174	1,068	25·9	123	115·1	606	14·8
1908.....	41,350	1,005	24·3	131	131·0	591	14·3
1909.....	41,524	1,013	24·3	111	109·6	521	12·5
1910.....	41,670	989	23·7	107	107·0	549	13·1
1911.....	41,854	946	22·6	197	208·0	734	17·4
Averages for ten years, 1902-1911.	41,136	1,065	25·8	143	134·5	617	14·9
1912.....	41,854	983	23·5	101	102·7	552	13·1

BIRTHS.

The births during the year numbered 983 or 37 more than last year, which had the lowest number recorded in our statistics. This is equal to a rate of 23·5 per 1,000; the average of the last ten years was 25·8.

IX.—1913.

The number of illegitimate births registered was 40, a percentage to the total of 4·6.

The number of still-born children was 45, of whom 27 were males and 18 females.

The birth rate for England and Wales was 23·8 ; for the 95 great towns 24·9 ; and for the country less the great towns 22·6.

DEATHS.

The number of deaths was 552 or 182 less than 1911, an unusually heavy year.

This is equal to a rate of 13·1 per 1,000 ; the average for the past ten years was 14·9.

The rates for the parishes are as follows ; and as the numbers in some cases are small, a comparison for the ten previous years is given :—

	1912.	1902-1911.
St. Peter-Port	14·1	15·5
St. Sampson's	13·6	13·7
Vale	11·3 ..	12·8
Castel (less deaths in Institutions)	13	13·4
St. Saviour's	15·8	15·2
St. Pierre-du-Bois	9·9	15·5
Torteval	10	16·5
Forest	13·1	17·5
St. Martin's	12·8	13·1
St. Andrew's	11·4	11·2

The death rate of St. Andrew's appears therefore to be the most constantly low in the island.

The crude death rate for England and Wales was 13·3 ; for the 95 great towns, 13·8 ; for London, 13·6 ; for the 146 smaller towns, 12·4 ; and for England and Wales, less the 241 towns, 12·9. Our percentage of deaths at the age periods was as follows :—

Under 1 year	18·3 per cent.
From 1 to 15 years	8·5 „
From 16 to 65 years	30·2 „
From 66 years and upwards	43 „

There were 22 deaths of persons of 90 years and over, and 68 of 80 years and over, percentages to the total of 4 and 12·3 respectively.

It is evident therefore that our old people must be tough and live long.

The following table will serve as a comparison showing the incidence of the commoner causes of death :—

	1912.	1911.	1906-1911.
Measles	4	50	10·5
Whooping Cough	0	21	9·7
Epidemic Enteritis	0	64	20·6
Diphtheria	21	10	6·1
Senile Decay	91	75	67
Cancer	44	53	47·5
Broncho-Pneumonia ...	4	19	9·5
Pneumonia	21	29	20
Heart Disease ...	70	72	64
Apoplexy	28	34	29
Tuberculosis.....	3	18	16·8
Phthisis	24	31	39

The following deaths took place in the public institutions of the island :—

Town Hospital	46
Town Asylum.....	5
Castel Hospital	17
Castel Asylum	3
Victoria Cottage Hospital.....	11
King Edward Sanatorium.....	14

CANCER.

The deaths from this disease show everywhere a general tendency to a rapid increase, and Guernsey is no exception.

The death rate in England and Wales has risen from ·38 per 1,000 in the years 1861-70 to ·75 in 1891-1900. In 1910 it was ·96.

In Guernsey it is, however, still higher, the average for the past eight years being 1·09.

In from 60 to 71 per cent. of the cases the liver and the intestinal tract is the seat of the disease.

Unfortunately we are at present unable, save by operation in some cases, to successfully deal with this disease, which causes so much suffering and mortality.

IX.—1913.

INFANTILE MORTALITY.

The infantile death rate for 1912 was less than half that of 1911, viz. :— 102·7 per 1,000 births instead of 208. The average for the preceding ten years was 143.

The rates in the separate districts are as follows :—

	1912.	1911.	1904-1911.
Town	102·7	250	139·7
St. Sampson's	73·4	300	172·2
Vale	130	111	128·5
Other Parishes	96·2	164	113·5

For the 14 years 1899-1912 the rates for each parish were as follows :—

St. Peter-Port	138	St. Peter's	154
St. Sampson's	152	Torteval.....	82
Vale.....	144	Forest	135
Castel.....	117	St. Martin's.....	109
St. Saviour's	120	St. Andrew's.....	104

In addition to the insanitary conditions and maternal ignorance which tend to high infantile mortality rates, the decline of breast feeding is a powerful factor.

If the mother has to go out to work she cannot nurse her baby, and the care of it often devolves upon quite young children, or old persons who may be ignorant and prejudiced in favour of a mixed diet for babies.

Unfortunately the expense of sufficient cows' milk in these cases is often prohibitive ; as a result the baby gets but little of it and plenty of baked flour and boiled bread. Apart from other considerations it is far cheaper for the mother to nurse the child if she is able, even if a quantity of extra nourishment has to be given her. Breast milk only is the natural food for babies during the first few months of life, or failing this cows' or goats' milk suitably diluted.

The breast-fed child enjoys a comparative immunity from the intestinal disorders and convulsions of infancy which are so fatal. This is true in all classes of the community and every effort should be made to bring home to mothers the truth of these statements.

The year 1912 was one in which the conditions in every way favoured a low rate of infantile mortality. Like 1903, the year of lowest mortality, viz. : 100, it was a cold and wet summer. As a result there was not a single death from Epidemic Enteritis compared with 60 in 1911, and only two deaths from

Measles and none from Whooping Cough compared with 18 and 11, a saving of 87 deaths under these three headings alone. The number of deaths due to Premature Birth and Debility at Birth was 35, or about 34 per cent. of the total.

Only general figures for 1912 are available, but a comparison with some English counties for 1910 and 1911 is as follows :—

	1910.	1911.	1912.
Guernsey	108·1	208	102·7
St. Peter-Port.....	111·4	250	102·7
St. Sampson's	84·8	300	73·4
Vale	143·8	111	130
The other seven parishes	100	164	96·2
Somersetshire	68·1	86	—
Hampshire	71	93	—
Devonshire (less three County Boroughs)	75	96	—
Wiltshire	76·9	68·7	—
Do. (4 urban districts)	Under 30.		—
England and Wales	109	130	95
London.....	104	128	90
The 95 great towns.....	—	140	101
The 146 smaller towns	—	145	99
Whole country less the towns...	96	118	86

In such an exceptional year as 1912 our figures should be lower, and the high averages of previous years should be noted, as they leave so much to be desired.

In St. Sampson's Parish it is to be hoped that the more abundant supply of water, the extension of the main drainage, and the collection of household refuse, will in the future enable me to record figures as satisfactory as those for 1912.

MARRIAGES.

The number of marriages was 290, a rate of 13·9 per 1,000. This is about the average of the preceding years.

Of these 181 took place in Church of England, 26 in Roman Catholic, 32 in Nonconformist Churches, and 51 at the Greffe Office.

Table II.

RETURN OF BIRTHS AND DEATHS REGISTERED DURING THE YEAR 1912.

BIRTHS.

PARISH LETTER:	A	B	C	D	E	F	G	H	I	K	Tl.
Males	194	92	64	40	15	27	5	17	38	26	518
Females	167	85	59	42	10	26	7	11	27	31	465
Totals	361	177	123	82	25	53	12	28	65	57	983

Rate per 1,000 20 . 29·7 . 22·4 . 26·6 . 23·2 . 32·8 . 24 . 30·9 . 18·9 . 32·5

STILL BIRTHS 18 ... 7 ... 9 ... 2 ... 4 ... 1 ... 0 ... 1 ... 3 ... 0 ... 45

DEATHS.

Diseases of the Blood.

Luchæmia	2	1	-	-	1	-	-	-	-	-	4
Myxœdema	1	-	-	-	-	-	-	-	-	-	1
Pernicious Anæmia.....	-	-	1	-	-	1	-	-	-	-	2
Rheumatism	2	-	-	-	-	-	-	-	1	-	3
Rheumatoid Arthritis	-	-	-	-	-	1	-	-	-	-	1
Diabetes.....	-	1	-	-	-	-	-	-	-	-	1

Epidemic.

Diphtheria	9	6	5	1	-	-	-	-	-	-	21
Influenza	2	-	1	-	-	-	-	-	1	-	4
Measles	4	-	-	-	-	-	-	-	-	-	4
Scarlet Fever	-	-	-	-	-	-	-	1	-	-	1
Cerebro Spinal Meningitis	-	1	-	-	-	-	-	-	-	-	1

Infancy and Old Age.

Asthenia	1	1	1	1	-	-	-	-	-	-	4
Congenital Malformation .	3	-	1	-	-	-	-	-	-	-	4
Convulsions	5	3	2	1	-	-	-	-	1	1	13
Debility at Birth	4	1	5	1	1	-	-	-	2	-	14
Marasmus	11	-	2	1	-	4	-	-	2	1	21
Premature Birth	9	5	2	3	1	-	-	-	1	-	21
Infantile Paralysis	-	-	-	-	-	-	-	1	-	-	1
Senile Decay.....	34	16	12	11	1	2	1	4	5	5	91

Carried forward 87 ...35 ...32 ...19 ... 4 ... 8 ... 1 ... 6 ...13 ... 7 ... 212
IX.—1913.

PARISH LETTER:	A	B	C	D	E	F	G	H	I	K	Tl.
Brought forward	87	35	32	19	4	8	1	6	13	7	212

Infective.

General Tuberculosis	-	-	1	-	-	-	-	-	-	-	1
Phthisis.....	13	2	1	6	-	-	-	1	-	1	24
Tubercular Meningitis.....	1	-	-	-	-	-	-	-	-	-	1
„ Peritonitis.....	-	-	-	1	-	-	-	-	-	-	1
Tetanus	1	-	-	-	-	-	-	-	-	-	1

Intemperance.

Alcoholism ..	2	1	-	-	1	-	-	-	-	-	4
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Septic.

Septicæmia	5	-	-	1	-	-	-	-	-	-	6
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Tumour.

Malignant.....	20	6	4	5	-	2	1	2	2	2	44
Fibroid	-	-	-	-	-	-	-	-	1	-	1

Violence.

Drowning	-	-	-	1	-	-	-	-	-	-	1
Fall	2	1	1	-	-	-	-	-	-	-	4
Suicide	2	1	-	-	-	-	1	-	2	-	6
Murder	-	1	-	-	-	-	-	-	-	-	1
Burns	1	-	-	-	-	-	-	-	-	-	1

Alimentary.

Gall Stone.....	2	-	-	-	-	-	-	-	-	-	2
Intestines	2	1	-	1	-	-	-	-	-	-	4
Liver	1	-	-	-	-	-	-	-	-	-	1
Obstruction of Bowels.....	1	1	-	-	-	-	-	-	1	-	3
Stomach	2	-	-	-	-	-	-	-	-	-	2
Peritonitis.....	1	-	-	-	-	-	-	-	-	1	2

Circulatory.

Aneurysm	1	-	-	-	-	-	-	-	-	-	1
Angina Pectoris	1	-	-	-	-	-	-	-	-	-	1
Apoplexy	17	2	2	4	-	1	-	-	2	-	28
Atheroma	6	-	-	1	1	1	1	-	1	-	11
Embolism	4	-	-	1	-	-	-	-	-	-	5

Carried forward	172	51	41	40	6	12	4	9	22	11	368
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IX.—1913.

APPENDICE.

13

PARISH LETTER:	A	B	C	D	E	F	G	H	I	K	Tl.
Brought forward	172	51	41	40	6	12	4	9	22	11	368
Gangrene	-	1	-	1	-	-	-	-	1	-	3
Heart Disease	35	11	4	3	1	1	1	1	8	5	70
Thrombosis	2	-	1	-	-	-	-	-	-	-	3

Nervous.

Meningitis.....	2	1	-	1	-	-	-	-	-	-	4
Paralysis	2	1	1	-	1	-	-	-	1	-	6
Tabes Dorsalis	-	-	-	1	-	-	-	-	-	-	1
Dementia	1	-	-	2	-	-	-	-	1	-	4
General Paralysis of Insane	1	-	-	1	-	-	-	-	-	-	2
Progressive Muscular											
Atrophy.....	1	-	-	-	-	-	-	-	-	-	1
Bulbar Paralysis	1	-	1	-	-	-	-	-	-	-	2
Epilepsy	4	-	1	1	-	-	-	1	-	1	8
Neuritis.....	-	-	1	-	-	-	-	-	-	-	1
Myelitis.....	1	-	-	-	-	-	-	-	-	-	1

Respiratory.

Bronchitis	11	3	3	2	2	1	-	1	1	1	25
Broncho-Pneumonia	1	-	-	1	1	1	-	-	-	-	4
Pleurisy	-	-	1	1	-	-	-	-	-	-	2
Pneumonia	8	2	3	3	1	-	-	-	4	-	21
Laryngitis	-	1	-	-	-	-	-	-	-	-	1
Quinsy	-	1	-	-	-	-	-	-	-	-	1

Urinary.

Cystitis	1	-	-	-	1	-	-	-	-	-	2
Nephritis	12	2	2	1	1	-	-	-	3	-	21
Renal Calculus	1	-	-	-	-	-	-	-	-	-	1

Totals.....	256	74	59	58	14	15	5	12	41	18	552
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Figures corrected after deduct-
ing deaths at Sanatorium
and Castel Hospital, and
returning them in the
respective parishes to which
they belonged.

	256	80	62	40	17	16	5	12	44	20	552
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Table
(INCP. SOC.)

A					B				C				D				E			
Names of Parishes.	ST. PETER-P.ORT.				ST. SAMPSON'S.				THE VALE.				CASTEL.				ST. SAVIOUR'S.			
YEAR.	Population estimated according to Census.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated according to Census.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated according to Census.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated according to Census.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated according to Census.	Births registered.	Deaths at all ages.	Deaths under 1 year.
Column ...	A	B	C	D	A	B	C	D	A	B	C	D	A	B	C	D	A	B	C	D
1901 Census	18162				5573				5082				2802				1062			
1902.....	—	459	302	60	—	175	83	25	—	168	77	28	—	65	60	10	—	27	16	2
1903.....	—	421	264	38	—	200	85	26	—	173	72	25	—	87	55	6	—	26	15	1
1904.....	—	461	321	77	—	165	87	37	—	164	71	26	—	104	46	9	—	29	30	4
1905.....	—	461	302	59	—	180	77	17	—	173	72	21	—	90	62	16	—	29	12	1
1906.....	—	427	268	54	—	174	64	29	—	145	69	21	—	93	64	12	—	32	18	7
1907.....	—	392	275	44	—	160	75	26	—	146	68	14	—	77	74	12	—	30	15	1
1908.....	—	366	257	44	—	163	93	34	—	144	57	16	—	88	70	10	—	38	14	3
1909.....	—	383	240	36	—	175	66	22	—	137	60	16	—	78	55	9	—	27	17	7
1910.....	—	368	242	41	—	165	64	14	—	139	68	20	—	71	60	9	—	29	14	3
1911 Census	18052	352	351	88	5952	140	101	42	5486	144	65	16	3082	82	78	8	1075	28	12	1
Average of 10 years to 1910.	18107				5763				5284				2942				1068			
1912.....	18052	361	256	41	5952	177	80	13	5486	123	62	16	3082	82	40	9	1075	25	17	3
Birth rate.. ...	20				29·7				22·4				26·6				23·2			
Death rate ...	14·1				13·6				11·3				13				15·8			

III.

OF M. O. H., 1900.)

	F				G				H				I				K			
Names of Parishes.	ST. PETER-IN-THE- WOOD.				TORTEVAL.				FOREST.				ST. MARTIN'S.				ST. ANDREW'S.			
YEAR.	Population estimated according to Census.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated according to Census.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated according to Census.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated according to Census.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated according to Census.	Births registered.	Deaths registered.	Deaths under 1 year.
Column ...	A	B	C	D	A	B	C	D	A	B	C	D	A	B	C	D	A	B	C	D
1901 Census	1577				446				842				3201				1552			
1902.....	—	53	31	11	—	14	12	4	—	30	13	4	—	93	43	14	—	44	20	3
1903.....	—	56	16	4	—	8	12	1	—	22	13	3	—	90	38	4	—	37	27	4
1904.....	—	52	35	8	—	10	6	0	—	27	20	5	—	91	51	10	—	41	23	5
1905.....	—	56	29	4	—	22	10	0	—	19	15	0	—	86	43	10	—	40	22	7
1906.....	—	60	25	9	—	6	9	2	—	26	15	6	—	107	45	13	—	42	11	1
1907.....	—	60	16	8	—	20	6	1	—	32	17	5	—	97	39	8	—	54	21	4
1908.....	—	44	29	8	—	14	4	2	—	27	11	4	—	78	38	8	—	43	18	2
1909.....	—	41	13	6	—	14	9	1	—	38	17	3	—	79	34	6	—	41	10	5
1910.....	—	49	30	8	—	14	4	1	—	32	17	2	—	81	40	5	—	41	15	4
1911 Census	1612	49	24	11	499	13	6	4	910	28	15	4	3436	73	64	20	1750	37	18	3
Average of 10 years to 1910.	1595				473				876				3329				1649			
1912.....	1612	53	16	6	499	12	5	0	910	28	12	1	3436	65	44	7	1750	57	20	5
Birth rate.....	32·8				24				30·9				18·9				32·5			
Death rate ...	9·9				10				13·1				12·8				11·4			

1912?

Table IV.

CAUSE OF, AND AGES AT, DEATH OF THE DEATHS REGISTERED
DURING THE YEAR 1911.

CAUSE OF DEATH.	Under 1.	WHOLE ISLAND.					66 and over.	Total.
		1-5.	6-15.	16-25.	26-65.			
<i>Diseases of the Blood.</i>								
Luchæmia	—	...	—	...	—	...	2 ... 2 ...	4
Myxœdema	—	...	—	...	—	...	1 ... — ...	1
Pernicious Anæmia.....	—	...	—	...	—	...	2 ... — ...	2
Rheumatism	—	...	—	...	—	...	3 ... — ...	3
Rheumatoid Arthritis	—	...	—	...	—	...	— ... 1 ...	1
Diabetes	—	...	—	...	—	...	1 ... — ...	1
<i>Epidemic.</i>								
Diphtheria	—	...	7 ...	12 ...	—	...	2 ... — ...	21
Influenza	—	...	—	...	—	...	— ... 4 ...	4
Measles	2	...	2 ...	—	...	—	— ... — ...	4
Scarlet Fever	—	...	—	1 ...	—	...	— ... — ...	1
Cerebro Spinal Meningitis...	—	...	—	...	1 ...	—	— ... — ...	1
<i>Infancy and Old Age.</i>								
Asthenia	4	...	—	...	—	...	— ... — ...	4
Congenital Malformation ...	4	...	—	...	—	...	— ... — ...	4
Convulsions	10	...	3 ...	—	...	—	— ... — ...	13
Debility at Birth	14	...	—	...	—	...	— ... — ...	14
Marasmus	19	...	2 ...	—	...	—	— ... — ...	21
Premature Birth.....	21	...	—	...	—	...	— ... — ...	21
Infantile Paralysis	1	...	—	...	—	...	— ... — ...	1
Senile Decay	—	...	—	...	—	...	2 ... 89 ...	91
<i>Infective.</i>								
General Tuberculosis	—	...	—	...	1 ...	—	— ... — ...	1
Phthisis	—	...	—	1 ...	9 ...	14 ...	— ... — ...	24
Tubercular Meningitis	—	...	—	1 ...	—	...	— ... — ...	1
„ Peritonitis	—	...	—	—	...	1 ...	— ... — ...	1
Tetanus	—	...	—	...	—	1 ...	— ... — ...	1
<i>Intemperance.</i>								
Alcoholism	—	...	—	...	—	3 ...	1 ...	4
Carried forward	75	..	14 ...	15 ...	11 ...	32 ...	97 ...	244

IX.—1912.

IX.—1912.

CAUSE OF DEATH.	WHOLE ISLAND.												
	Under 1.	1-5.	6-15.	16-25.	26-65.	66 and over.	Total.						
Brought forward.....	75	...	14	...	15	...	11	...	32	...	97	...	244
<i>Septic.</i>													
Septicæmia	—	...	—	...	1	..	—	...	4	...	1	...	6
<i>Tumour.</i>													
Malignant	—	..	—	...	—	...	2	...	22	...	20	...	44
Fibroid.....	—	...	—	...	—	...	—	...	1	...	—	...	1
<i>Violence.</i>													
Drowning	—	...	—	...	—	...	—	...	1	...	—	...	1
Fall	—	...	—	...	—	..	—	...	1	...	3	...	4
Suicide.....	—	...	—	...	—	...	—	...	6	...	—	...	6
Murder.....	—	...	—	...	—	...	—	...	1	...	—	...	1
Burns	—	...	—	...	1	...	—	...	—	..	—	..	1
<i>Alimentary.</i>													
Gall Stone	—	...	—	...	—	...	—	...	—	...	2	...	2
Intestines	2	...	1	...	—	...	—	...	1	...	—	...	4
Liver	—	...	—	...	—	...	—	...	—	...	1	...	1
Obstruction of Bowels	—	...	—	...	—	...	—	...	1	...	2	...	3
Stomach	—	...	—	...	—	...	—	...	2	...	—	...	2
Peritonitis	—	...	—	...	—	...	1	...	1	...	—	...	2
<i>Circulatory.</i>													
Aneurysm ..	—	...	—	...	—	...	—	...	1	...	—	...	1
Angina Pectoris	—	...	—	...	—	...	—	...	—	...	1	...	1
Apoplexy	1	...	—	...	—	...	—	...	11	...	16	...	28
Atheroma	—	...	—	...	—	...	—	...	1	...	10	...	11
Embolism	—	...	—	...	—	...	—	...	3	...	2	...	5
Gangrene.....	—	...	—	...	—	...	—	...	—	...	3	...	3
Heart Disease	1	...	—	...	3	...	1	...	30	...	35	..	70
Thrombosis	—	..	—	...	—	...	—	...	2	...	1	...	3
<i>Nervous.</i>													
Meningitis	1	...	2	...	1	...	—	...	—	...	—	...	4
Paralysis	—	...	—	...	—	...	—	...	1	...	5	...	6
Tabes Dorsalis	—	...	—	...	—	...	—	...	1	...	—	...	1
Dementia.....	—	...	—	...	—	...	—	...	1	...	3	...	4
Carried forward	80	...	17	...	21	...	15	...	124	...	202	...	459

IX.—1913.

6

CAUSE OF DEATH.	WHOLE ISLAND.									
	Under 1.	1-5.	6-15.	16-25.	26-65.	66 and over.	Total.			
Brought forward.....	80	...	17	...	21	...	15	...124	...202	...459
General Paralysis of Insane.	—	...	—	...	—	...	1	...	1	.. 2
Progressive Muscular										
Atrophy	—	...	—	...	—	...	1	...	—	... 1
Bulbar Paralysis.....	—	...	—	...	—	...	2	...	—	... 2
Epilepsy	—	...	1	...	1	...	5	...	1	... 8
Neuritis	—	...	—	...	—	...	1	...	—	... 1
Myelitis	—	...	—	...	—	...	—	...	1	... 1
<i>Respiratory.</i>										
Bronchitis	12	..	4	...	—	...	3	...	6	... 25
Broncho-Pneumonia	2	...	1	...	—	...	—	...	1	... 4
Pleurisy	—	...	—	...	—	...	1	...	1	... 2
Pneumonia	7	...	1	...	—	...	4	...	9	... 21
Laryngitis	—	...	1	...	—	...	—	...	—	... 1
Quinsy.....	—	...	—	...	—	...	—	...	1	... 1
<i>Urinary.</i>										
Cystitis	—	...	—	...	—	...	1	...	1	... 2
Nephritis.....	—	...	—	...	..	1	...	7	13	... 21
Renal Calculus	—	...	—	...	—	...	1	...	—	... 1
Totals	101	...	25	...	22	...	16	...151	...237	.. 552

KING EDWARD SANATORIUM.

Of the 270 cases of notifiable infectious disease during the year, 235 patients were admitted to the Sanatorium: 139 Diphtheria, 93 Scarlet Fever, and 3 Enteric. There were 14 deaths there, the percentage of deaths at the Sanatorium being 6, against 22·2 in the case of patients isolated at home. The daily average of patients was 22, and staff 14·3. As the Sanatorium was designed for the accommodation of 22 patients, giving each one the full air and floor space, it appears that its capacity has been taxed to the limit. It has, however, as in some previous years, been at times greatly overcrowded, January giving the highest daily average, 31·3, and September the lowest, 12·6. I have often mentioned in previous reports the need of another ward and it is not necessary to refer to it, save to say that the experience of 1912 has again emphasized this need. After the past heavy years we are justified in now expecting a period of comparative freedom from infectious diseases, and it is in this period that we should make ready for the time when the cycle will again change and busy years result.

IX.—1913.

We know by long experience that this will happen, and the day when a permanent diminution in the number of cases will take place in Guernsey is not yet.

Table V.

CASES TREATED AT THE SANATORIUM AND AT HOME, 1912.

	St. Peter-Port.	St. Sampson's.	Vale.	Castel.	St. Saviour's.	St. Peter-in-the-Wood.	Torteval.	Forest.	St. Martin's.	St. Andrew's.	Total.
DIPHTHERIA.											
At the Sanatorium ...	95	18	16	3	0	0	0	0	7	0	139
At Home	3	2	18	1	0	0	0	0	0	0	24
Total	98	20	34	4	0	0	0	0	7	0	163
SCARLET FEVER.											
At the Sanatorium ...	36	10	16	4	5	0	0	1	19	2	93
At Home	1	1	2	1	0	0	0	1	2	0	8
Total	37	11	18	5	5	0	0	2	21	2	101
ENTERIC FEVER.											
At the Sanatorium ...	2	0	0	0	0	0	0	0	0	1	3
At Home	0	0	2	0	1	0	0	0	0	0	3
Total	2	0	2	0	1	0	0	0	0	1	6
Grand Total ...	...	...	...	...	...	...	...	...	...	...	270

CLASSIFIED ACCORDING TO AGES, 1912.

	0-1	1-5	5-10	10-15	15-20	20-25	25 & over.	Tl.
DIPHTHERIA	0	32	70	24	8	8	21	163
SCARLET FEVER	1	18	48	21	3	3	7	101
ENTERIC FEVER	0	0	0	0	2	1	3	6
Grand Total.....								270

NOTIFIABLE INFECTIOUS DISEASES.

Attack rate per 1,000=6·4.

Death rate per 1,000=·54.

DIPHTHERIA.

The cases notified numbered 163 and the deaths 21, the attack rate and death rate per 1,000 being respectively 3·9 and ·5.

In 1911 there were 117 cases, and the type of disease was severe and infective, but in 1912 an increasingly malignant and fatal form prevailed, due to the association of other micro-organisms causing rapid blood destruction, in addition to the specific bacillus of the disease.

The epidemics were chiefly confined to the Town, Vale and St. Sampson's parishes; no cases were reported from St. Saviour's, St. Peter's, Torteval, Forest or St. Andrew's. The cases were more evenly distributed during the year than is usually the case.

In the Town no month was free, and in St. Sampson's and the Vale only two were free from cases.

Vauvert, Amherst, Melrose, Burnt Lane and Les Landes schools were affected, and of these Amherst and Elim Sunday schools furnished the larger number, viz. : 19 cases.

Of this number 10 were found as a result of tracing school absentees; the teachers at Amherst school rendered invaluable aid in this matter, and the authorities at Elim Sunday school readily fell in with all the suggestions I made to them.

In the town I do not think that the belief in witchcraft or "overlooking" had much to do with the spread of the disease, but in the country it certainly had, and in the last months of the year the opening up of the Cromlech at l'Islet was considered in the north end of the island to be answerable for the prevalence of Diphtheria.

When such views are held it is not surprising to find that but little importance is attached to medical treatment and isolation.

Of 98 cases in the Town parish only 3 were isolated at home, and of 20 in St. Sampson's 2, and of 34 in the Vale no less than 18. In the case of the latter parish, in my opinion the home isolation was often unsatisfactory, but the decision as to whether a case is to be removed to the Sanatorium or allowed to remain at home rests, not with the Board of Health through its Medical Officer, but with the Constables of the parish.

This power should certainly rest with the Board of Health, who are in the best position to judge every case upon its merits and decide accordingly.

A factor, which in practice often prevents the calling in of a medical man, is the reluctance of the Stranger Poor and paupers living in another parish to which they belong to apply to the proper authorities for medical relief. Stranger Poor will not in some instances apply to the Constables as they fear that they may be sent away from the Island, a fear which is, in the cases I mention, groundless. With paupers living out of their original parish the difficulties are real ones. They have to apply to the authorities of their own parish and be attended by its doctor; this may mean a delay in several ways and a longish journey for them, and is a cumbrous system at the best.

The remedy is to arrange that the doctor of the parish in which they live should attend them in case of illness, and that his services should be available with the minimum of delay.

Table VI.

DIPHTHERIA FOR 1912.

Parishes.	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Tl.
St. Peter-Port.....	2	8	16	14	13	13	6	8	4	2	9	2	97
St. Sampson's.....	1	3	4	1	—	2	2	2	—	—	4	1	20
Vale.....	—	2	2	—	1	2	10	1	4	4	5	2	33
Castel	—	1	—	—	1	—	1	—	1	—	—	—	4
St. Saviour's	—	—	—	—	—	—	—	—	—	—	—	—	0
St. Peter-in-the-Wood .	—	—	—	—	—	—	—	—	—	—	—	—	0
Torteval	—	—	—	—	—	—	—	—	—	—	—	—	0
Forest	—	—	—	—	—	—	—	—	—	—	—	—	0
St. Martin's.....	2	—	1	—	—	—	1	1	—	—	—	2	7
St. Andrew's	—	—	—	—	—	—	—	—	—	—	—	—	0
Doubtful	—	—	—	—	—	—	—	—	—	—	2	—	2
Total	5	14	23	15	15	17	20	12	9	6	20	7	163
Died at Sanatorium ...	1	—	3	2	3	—	2	1	1	—	1	—	14
„ Home.....	—	—	—	—	—	1	1	—	1	—	3	1	7
Total.....													21

IX.—1913.

SCARLET FEVER.

There were 101 cases notified in 1912 and the disease was throughout of a mild type.

In several instances localised outbreaks occurred as the result of first cases being overlooked.

This was particularly so in January and February when in St. Martin's five cases occurred in one family and several others in the neighbourhood, six in the Vale and four in St. Saviour's.

In May three cases were due to infection in Sark.

In August the Capelles School and in November and December Melrose and the Vale Schools furnished cases.

In six families there were two cases, in three three cases, in one five, and in one six cases respectively.

As usually happens the winter and autumn months furnished the largest number of cases, October to March 81, against the remainder of the year 20 cases.

There were no notifications from Torteval and St. Peter's.

Ninety-three cases were removed to the Sanatorium and eight treated at home. There was one death, that of a patient isolated at home.

Table VII.

SCARLET FEVER FOR 1912.

Parishes.	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Tl.
St. Peter-Port.....	12	...	1	...	1	...	1	...	4	..	3	...	37
St. Sampson's.....	2	...	2	...	1	...	-	...	-	..	1	...	11
Vale.....	5	...	-	...	1	...	-	...	-	..	1	...	18
Castel ..	-	...	1	...	-	...	-	...	-	..	-	...	5
St. Saviour's	4	...	-	...	-	...	-	...	-	..	-	...	5
St. Peter-in-the-Wood .	-	...	-	...	-	...	-	...	-	..	-	...	0
Torteval	-	...	-	...	-	...	-	...	-	..	-	...	0
Forest	-	...	-	...	-	...	-	...	-	..	-	...	2
St. Martin's.....	3	...	7	...	5	..	-	...	2	...	-	...	21
St. Andrew's	-	...	1	...	1	...	-	...	-	..	-	...	2
Total	26	...	12	...	9	...	1	...	6	..	3	...	101
Died at Home	-	...	-	...	-	...	-	...	-	..	-	...	1
Total.....													1

ENTERIC FEVER.

There were six cases during the year and no deaths. The first was in May, a young man who fell ill whilst on a holiday in France. His was a very severe attack and he had been ill for nearly a fortnight before admission to the Sanatorium; he was a patient there for over twelve weeks. The other cases were all reported in the middle of September and were fortunately of moderate severity.

Three were men of between 50 and 60 years of age—one lived in St. Saviour's and the other two in the Vale parish. Of the two latter cases, one contracted his illness from the other, who had been ill for some weeks before the nature of his sickness was realised; they were next door neighbours. A young man of 19 and a girl of 15 from the Town parish were the last two cases. The girl had been on a visit to Sark and it is possible she became infected there.

It seems probable that there was some factor common to the last four or five cases, but if so it was impossible to ascertain what it was.

In the Vale cases the drinking water was of bad quality. The well was opened, cleaned, then properly covered and fitted with a pump, instead of being, as before, unprotected.

Table VIII.

ENTERIC FEVER FOR 1912.

Parishes.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Tl.
St. Peter-Port	—	...	—	...	—	...	—	...	2	...	—	...	2
St. Sampson's	—	...	—	...	—	...	—	...	—	...	—	...	0
Vale	—	...	—	...	—	...	—	...	2	...	—	...	2
Castel	—	...	—	...	—	...	—	...	—	...	—	...	0
St. Saviour's	—	...	—	...	—	...	—	...	1	...	—	...	1
St. Peter-in-the-Wood .	—	...	—	...	—	...	—	...	—	...	—	...	0
Torteval	—	...	—	...	—	...	—	...	—	...	—	...	0
Forest	—	...	—	...	—	...	—	...	—	...	—	...	0
St. Martin's.....	—	...	—	...	—	...	—	...	—	...	—	...	0
St. Andrew's	—	...	—	...	1	...	—	...	—	...	—	...	1
Doubtful	—	...	—	...	—	...	—	...	—	...	—	...	0
Total	—	...	—	...	1	...	—	...	5	...	—	...	6

CEREBRO SPINAL MENINGITIS.

One case of this disease, a rapidly fatal one, was reported. It is several years since any cases have been seen here, though a considerable number have occurred in England lately.

IX.—1913.

Its infectivity varies and fortunately in this instance appears to have been low.

Infection seems to be carried in dust and to enter the body through the nose : horses are said to sometimes suffer from it.

ROTHERN OR GERMAN MEASLES.

This disease was imported in the autumn and spread rapidly. It is a mild but very infectious sickness often attacking adults.

The appearance of the rash is sometimes the first symptom of illness, and infection is given off from the time that the patient sickens, if not before. The incubation period is most commonly 18 or 19 days, but may be longer or shorter ; its infective period is short, a fortnight at the utmost. It is difficult in practice to prevent its spreading, although in theory it should be possible to do so.

TUBERCULOSIS.

The number of deaths during the year from all forms of Tuberculosis was 27 : of these 24 were due to Pulmonary Phthisis.

This is fortunately a small number, only one out of every twenty-three deaths being due to Tuberculosis.

The rates for deaths from tuberculosis and Phthisis per 1,000 living were ·64 and ·57 respectively.

In England and Wales 1910 they were 1·43 and 1·02.

In France the Tuberculosis rate was 2·17 and out of every 100 men dying between the ages of twenty and thirty-nine, that is in the prime of life, no less than 42 died as the result of Tuberculosis.

With us the average age of death was, males 39 and females 21·6. As usually the case there were more deaths amongst males, 14 against females 10, but the age at death is considerably higher than in the case of females.

Notification of Phthisis was made compulsory at the early part of the year, and 23 notifications were received ; this did not represent the total number of cases, and no doubt a larger number will be reported in 1913.

I regret that no steps have been taken to cope with this disease on the lines suggested in my report for 1910.

The only consequence of notification has been the disinfection of rooms which have been occupied by consumptive persons : 31 of these were thus treated.

In 1904 I suggested that when there was accommodation at the Sanatorium early cases might be admitted to the wards for a limited period.

The general education effect of such treatment would be valuable in addition to the benefit conferred upon the patient.

When once a person suffering from this disease realises the great improvement in his cough and general condition abundance of fresh air produces, he will not consent to live under other conditions ; in addition he can be taught to deal with his expectoration in a way which would prevent risk of infection to persons living with him.

As I anticipate one or two years with few cases of notifiable infectious diseases, I would again urge the adoption of this plan ; but in view of the limited space at our disposal would suggest admitting cases of one sex only at a time. Such patients could in case of need be sent home at any time.

WATER SUPPLY.

This question has been actively pressed forward, and it is to be hoped that the Committee which has considered the matter for so many years and issued such admirable reports will soon see their efforts to obtain an adequate supply crowned with success.

If this is to be, the water must be obtained from streams, and must be properly stored and filtered ; it will then be not only a safe but an ample source of supply.

The Vale Mill Quarry should be regarded as a temporary supply only, as its use provides but a small amount of water and is very expensive in its working.

DISINFECTION FOR 1912.

The following are the details of the work carried out by the Sanitary Inspector and Staff during the year.

Adults and Children's Clothing	4,267
Blankets, Counterpanes and Sheets.....	1,918
Bolsters and Pillows	878
Feather Beds.....	195
Floor Coverings.....	395
Mattresses	571
Sundry Articles.....	1,908
Rooms for Notifiable Diseases.....	284
Rooms for Phthisis	31
Rooms for Non-notifiable Diseases	4
Cow Sheds disinfected and limewashed	19
Primary Schools	5
Houses visited and re-visited	470
Rooms and Wards at the Sanatorium	25
Rooms and Ward at the Town Hospital	13
Samples of Water.....	7

A Requête signed by several influential members of the States appeared in the Billet d'État of the 11th December, 1912.

The petitioners stated in it their conviction that the existing system, whereby the Douzaine of each parish is its Sanitary Authority and the Board of Health an advisory Committee only, had in practice proved a failure; the island was, in their opinion, too small for ten executive bodies and one consultative body to exercise their functions with advantage to the community.

On account of pressure of business the requête was not considered by the States until early in 1913.

A Medical Officer of Health in England is directed by the Local Government Board, in his annual report to enter into details as to the working of the following acts and conditions in the area in which he serves, and any action or inaction in the district in relation to them, on the part of his authority :—

Factory and Workshops Act, 1901.

Bakehouses.

Public Health Amendment Act, 1890.

House Accommodation. (Housing and Town Planning Act, 1909.)

Water Supply.

Milk Supply.

Food Inspection.

Sale of Food and Drugs Act.

Sewerage and Drainage and localities where improvements are needed.

Removal and disposal of household refuse.

Nuisances, proceedings for their abatement.

Bye-laws as regards offensive trades, houses let in lodgings, &c.

Schools, especially public elementary schools. Arrangements for medical inspection of school children.

Methods of control of tuberculosis.

A consideration of this schedule will show how limited are the powers of the Board of Health, and no considerable expansion of them is possible until one working Sanitary Authority for the whole island is an accomplished fact.

We are still pioneers and laying the foundations of our sanitary system, and I would mention that this report is only the fourteenth of the Medical Officer of Health. In the eighth annual report (1906) I wrote, "it would
IX.—1913.

of course be possible, but it would be extremely inadvisable, to add suddenly to the Statute Books here the whole of the many acts and regulations at present in force in England."

I am still of this opinion, and I consider that our energies ought in the first place to be directed to the improvement of the Water Supply, the extension of a system of drainage to certain congested areas, the efficient collection and disposal of household refuse, the provision of suitable sanitary dwellings for the working classes, and the medical inspection of school children.

Having placed these matters on a satisfactory basis we could then deal with questions more directly affecting the well-being of the working classes.

The Factory Acts and Home Work Order, 1911, will be found to provide carefully for the welfare of the young as well as the adult worker. Many of the provisions of these acts would not however be required in Guernsey.

A Committee has been formed to consider the Children's Act of 1908 with a view to its adoption here ; its report will not I believe be long delayed.

There are two Acts dealing with young people working in shops that could be put in force here without difficulty, as the regulations of these would not concern the Sanitary Authority so much as the police.

They are the Shop Hours Act, 1892, and Seats for Shop Assistants Act, 1899.

The former prohibits the employment of any young person under the age of 18 years in a shop, factory or workshop for a longer period than 74 hours (including meal times) in any one week ; the latter requires not less than one seat to every three female assistants employed in shops or similar places. The Shops Act, 1912, is an adoptive measure and not everywhere in force.

These Acts would, I am sure, meet with hearty support from the public, as no one could say that their provisions were unreasonable.

They would indisputably greatly benefit the young people concerned.

Our method of handling meat imported before it reaches the Abattoir, where it is inspected by the Meat Inspector, is very unsatisfactory.

The meat when landed is dumped on hurdles on the ground, and before removal, which is left to the consignee, is exposed to the unwelcome attentions of dogs.

In my opinion it should be removed in a special van, the property of the States, and some official should be made answerable for its being handled in a proper manner.

IX.—1913.

Although there is an ordinance dealing with the transfer of meat from the Abattoir to the Market, it does not seem satisfactory in its working, as meat is often but roughly covered by cloths of questionable cleanness and conveyed in unsuitable vehicles. The van recommended above might with advantage be also used for this latter purpose. This system is now in force in Jersey.

During the year the drainage of St. Sampson's has been largely extended, although as yet but few connections to the main sewer have been made ; but nothing has been done to provide a system of drainage for the populous parts of the Vale and St. Martin's parishes.

These two parishes are badly in need of main drainage as well as a system for the collection of house refuse.

During dry weather the dust nuisance is much in evidence. As the humidity of the air is somewhat high, such preparations for allaying the dust as Calcium Chloride, which depend upon their power for taking up moisture from the atmosphere to prevent this nuisance, should be especially valuable here.

Short stretches of road have been treated with tar ; although the results have been satisfactory, tar from our Gas Works is regularly exported for this purpose.

English authorities buy our tar and pay the heavy freight upon it, and yet it is not used here where it could be bought more cheaply.

No samples of foods have been analysed during the year with the exception of water.

A Committee has been considering the question of analyses of manures for growers and foods for cattle.

Surely, in this instance, the main point has been lost sight of and treated as one of secondary importance.

It is my duty to the community, and an unpleasant one it is, to point out the deficiencies of our sanitary organisation ; but it is with pleasure I can call attention to some great advantages which residents and visitors to Guernsey enjoy. The natural beauties of the Island are such that no one can fail to appreciate them, but the abundant sunshine which we enjoy (and in the year 1912 we hold the record for the British Isles), the milk at once so rich in fat and so free from tuberculosis, are points so much in favour of Guernsey that it is difficult to over-estimate their value.

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